



Patent / Docket No. 31849.24
Customer No. 000027683

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:
Walker, et al.

Serial No.: 09/668,831

Filed: September 22, 2000

For: Cordless Surgical Handpiece With
Disposable Battery And Method

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Group Art Unit: 3731

Examiner: Daniel J. Davis

TRANSMITTAL

Commissioner For Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Enclosed are the following regarding the above-identified patent application:

1. Notice of Appeal in triplicate;
2. a check in the amount of \$330.00; and
3. a return postcard.

The Commissioner is hereby authorized to charge payment of any further fees associated with any of the papers submitted herewith or to credit any overpayment to Deposit Account No. 08-1394.

Respectfully submitted,

David M. O'Dell
Reg. No. 42,044

Date: 7-16-04

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Facsimile: 214-200-0853

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Bonnie Boyle

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PTO/SB/31 (08-03)
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**NOTICE OF APPEAL FROM THE EXAMINER TO
THE BOARD OF PATENT APPEALS AND INTERFERENCES**

Docket Number (Optional)

31849.24

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Signature Bonnie Boyle

Typed or printed name Bonnie Boyle

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Walker, et al.

Application Number
09/668,831

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For Cordless Surgical Handpiece With Disposable Battery
And Method

Art Unit 3731

Examiner Daniel J. Davis

Applicant hereby **appeals** to the Board of Patent Appeals and Interferences from the last decision of the examiner.

The fee for this Notice of Appeal is (37 CFR 1.17(b))

\$ 330.00

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:

\$ _____

☒ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.

☐ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 08-1394. I have enclosed a duplicate copy of this sheet.

☐ A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

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I am the

☐ applicant/inventor.

☐ assignee of record of the entire interest.
See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed.
(Form PTO/SB/96)

☒ attorney or agent of record.
Registration number 42, 044

☐ attorney or agent acting under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a): _____

David M. O'Dell
Signature

David M. O'Dell

Typed or printed name

972-739-8635

Telephone number

7-16-04

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.191. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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